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| UTILITY PATENT APPLICATION TRANSMITTAL <small>(only for new nonprovisional applications under 37 CFR 1.53(b))</small> | | Attorney Docket No. | IND-38DIV |
| | | First Inventor | James, IV, Benjamin |
| | | Title | OPTICAL FIBER INCLUDING A DIFFUSER PORTION AND CONTINUOUS SLEEVE FOR THE TRANSMISSION OF LIGHT |
| | | Express Mail Label No. | ER 554 942 686 US |
| APPLICATION ELEMENTS | | ADDRESSED TO: Mail Stop Patent Application U.S. PTO Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 <small>9271 10/726806 120303</small> | |
| See MPEP Chapter 600 concerning utility patent application contents. | | 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(submit an original and a duplicate for fee processing)</i> | |
| 2. <input type="checkbox"/> Applicant claims small entity status. | | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | |
| 3. <input checked="" type="checkbox"/> Specification [Total Pages 17] <i>(Preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure | | 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies | |
| | | ACCOMPANYING APPLICATION PARTS | |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 2] | | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) | |
| 5. Oath or Declaration [Total Pages 4] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> | |
| | | 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> | |
| | | 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations | |
| | | 13. <input type="checkbox"/> Preliminary Amendment | |
| | | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> | |
| | | 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> | |
| | | 16. <input type="checkbox"/> Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | |
| | | 17. <input type="checkbox"/> Other | |
| 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | | | |
| 18. <input checked="" type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No 10/315,440 filed 12/10/02 which is a continuation of US application No. 09/785,571. Prior application information: Examiner Scott A. Knauss Group Art Unit: 2874 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | |
| 19. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label 000027777 or <input type="checkbox"/> Correspondence Address below | | | |
| Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA | | | |
| 20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to Gerry S. Gressel at: Telephone: (513) 337-3535 Fax: (513) 337-8489 | | | |
| 21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED | | | |
| NAME | Gerry S. Gressel | Reg. No. 34,342 | |
| SIGNATURE |  <i>Dec 3, 2003</i> | | |

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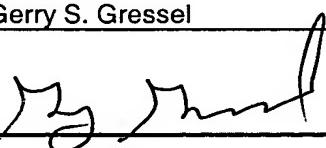
| | | <i>Complete if Known</i> |
|------------------------|--|--------------------------|
| FEE TRANSMITTAL | | Application Number |
| | | December 2003 |
| | | First Named Inventor |
| | | James, IV, Benjamin |
| | | Group Art Unit |
| | | 4261 |
| | | Examiner Name |
| | | Scott A. Knauss |
| | | Attorney Docket Number |
| | | IND 53DIV |

FEE CALCULATION**CLAIMS AS FILED**

| (1) | (2) | (3) | (4) | (5) |
|---------------------------|--------------------------|--------------|------------|-----------------------|
| FOR: | NUMBER FILED | NUMBER EXTRA | RATE | BASIC FEE \$770.00 |
| TOTAL CLAIMS | 30 - 14= 16 | 0 | x 18.00 | \$770.00 |
| INDEPENDENT CLAIMS | 03 - 3 = | 0 | x 86.00 | \$ 0.00 |
| MULTIPLE DEPENDENT CLAIMS | <input type="checkbox"/> | N/A | \$280.00 | |
| | | | TOTAL FEES | \$ 770.00 |

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/IND 38DIV/GSG in the amount of \$770.00.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/IND 38DIV/GSG. Three copies of this sheet are enclosed.

| SUBMITTED BY: | | | <i>Complete (if applicable)</i> |
|-----------------------|---|------------------------|------------------------------------|
| Typed or Printed Name | Gerry S. Gressel | | Reg. No. 34,342 |
| Signature |  | Date: December 3, 2003 | Deposit Account No. 10-0750 |